



## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE  
 Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 or **Fax** (571) 273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS: (Note: Use Block 1 for any change of address)

Michael S. Gzybowski  
 BUTZEL LONG  
 350 South Main Street  
 Suite 300  
 Ann Arbor, MI 48104

11/24/2006 HDENESS2 00000010 122136 10669910

01 FC:1501 1400.00 DA  
 02 FC:1504 300.00 DA

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

## Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date

Debra L. Burns (Depositor's name)  
 (Signature)  
 November 22, 2006 (Date)

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 10/669,910      | 09/24/2003  | Hikari Kawata        | 121027-199          | 8157             |

TITLE OF INVENTION: DISPOSABLE BODY FLUID ABSORBENT PAD

| APPLN. TYPE        | SMALL ENTITY | ISSUE FEE DUE  | PUBLICATION FEE DUE | PREV. PAID ISSUE FEE | TOTAL FEE(S) DUE | DATE DUE   |
|--------------------|--------------|----------------|---------------------|----------------------|------------------|------------|
| nonprovisional     | NO           | \$1400         | \$300               | \$0                  | \$1700           | 01/05/2007 |
| EXAMINER           | ART UNIT     | CLASS-SUBCLASS |                     |                      |                  |            |
| KIDWELL, MICHELE M | 3761         | 804-359000     |                     |                      |                  |            |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 BUTZEL LONG

2

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

UNI-CHARM CORPORATION

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Ehime-ken, Japan

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee  
☒ Publication Fee (No small entity discount permitted)  
☐ Advance Order - # of Copies

4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

- ☐ A check is enclosed.  
☐ Payment by credit card. Form PTO-2038 is attached.  
☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any to Deposit Account Number 12-2136 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Date November 22, 2006

Typed or printed name

Michael S. Gzybowski

Registration No. 32,816

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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PTOL-85 (Rev. 07/06) Approved for use through 04/30/2007.

OMB 0651-0033

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

PAGE 3/5 \* RCVD AT 11/22/2006 12:20:58 PM [Eastern Standard Time] \* SVR:USPTO-EFXXF/6/43 \* DNIS:2732885 \* CSID:734 302 7622 \* DURATION (mm:ss):02:32

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|  |  |                          |                      |
|--|--|--------------------------|----------------------|
| <b>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</b> |  | <b>Complete if Known</b> |                      |
| <b>FEE TRANSMITTAL<br/>for FY 2006</b>   |  | Application Number       | 10/669,910           |
|  |  | Filing Date              | September 24, 2003   |
|  |  | First Named Inventor     | Hikari KAWATA et al. |
|  |  | Examiner Name            | Michele Kidwell      |
|  |  | Art Unit                 | 3761                 |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 |  | Attorney Docket No.      | 121027-199           |
| <b>TOTAL AMOUNT OF PAYMENT (\$)</b>  |  | <b>\$1,700.00</b>        |                      |

**METHOD OF PAYMENT** (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_

☒ Deposit      Deposit Account Number: 12-2136      Deposit Account Name: BUTZEL LONG

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below      ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or any underpayments of fee(s) under 37 CFR 1.18 and 1.17      ☒ Credit any overpayments

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**FEE CALCULATION** (All the fees below are due upon filing or may be subject to a surcharge.)

**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| Application Type | FILING FEES |                       | SEARCH FEES |                       | EXAMINATION FEES |                       | Fees Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
|                  | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)         | Small Entity Fee (\$) |                |
| Utility          | 300         | 150                   | 500         | 250                   | 200              | 100                   |                |
| Design           | 200         | 100                   | 100         | 50                    | 130              | 65                    |                |
| Plant            | 200         | 100                   | 300         | 150                   | 160              | 80                    |                |
| Reissue          | 300         | 150                   | 500         | 250                   | 600              | 300                   |                |
| Provisional      | 200         | 100                   | 0           | 0                     | 0                | 0                     |                |

**2. EXCESS CLAIM FEES**

| Fee Description                                    | Fee (\$) | Small Entity Fee (\$) |
|--|----------|-----------------------|
| Each claim over 20 (including Reissues)            | 50       | 25                    |
| Each independent claim over 3 (including Reissues) | 200      | 100                   |
| Multiple dependent claims                          | 360      | 180                   |

**Total Claims**      **Extra Claims**      **Fee (\$)**      **Fee Paid (\$)**

- 20 or HP = \_\_\_\_\_ x \_\_\_\_\_ = \$50.00

HP = highest number of total claims paid for, if greater than 20.

**Indep. Claims**      **Extra Claims**      **Fee (\$)**      **Fee Paid (\$)**

- 3 or HP = \_\_\_\_\_ x \_\_\_\_\_ = \$200.00

HP = highest number of independent claims paid for, if greater than 3.

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listing under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

**Total Sheets**      **Extra Sheets**      **Number of each additional 50 or fraction thereof**      **Fee (\$)**      **Fee Paid (\$)**

- 100 = \_\_\_\_\_ / 50 \_\_\_\_\_ (round up to a whole) x \$250.00 = \$0.00

**4. OTHER FEE(S)**

Non-English specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): **Issue and Publication Fees**

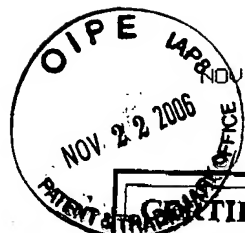
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|                     |                      |                                      |                   |
|---------------------|----------------------|--------------------------------------|-------------------|
| <b>SUBMITTED BY</b> |                      |                                      |                   |
| Signature           |                      | Registration No.<br>(Attorney/Agent) | 32,816            |
| Name (Print/Type)   | Michael S. Gzybowski | Telephone                            | 734-995-3110      |
|                     |                      | Date                                 | November 22, 2006 |

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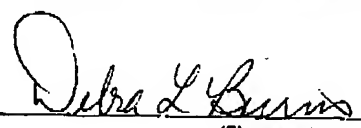


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|  |  |                                    |                                 |
|--|--|------------------------------------|---------------------------------|
| <b>CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)</b> |  |                                    | <b>Docket No.</b><br>121027-199 |
| Applicant(s): Hikari KAWATA et al.                           |  |                                    |                                 |
| <b>Application No.</b><br>10/669,910                         | <b>Filing Date</b><br>September 24, 2003 | <b>Examiner</b><br>Michele Kidwell | <b>Group Art Unit</b><br>3761   |
| <b>Invention:</b><br>DISPOSABLE BODY FLUID ABSORBENT PAD     |  |                                    |                                 |

I hereby certify that this Transmittal of Payment of Issue Fee, Part B-Fee Transmittal and Fee Transmittal  
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**TRANSMITTAL OF PAYMENT OF ISSUE FEE (Large Entity)**  
(37 C.F.R. 1.311)

Docket No.

121027-199

Applicant(s): Hikari KAWATA et al.

| Application No. | Filing Date        | Examiner        | Customer No. | Group Art Unit | Confirmation No. |
|-----------------|--------------------|-----------------|--------------|----------------|------------------|
| 10/669,910      | September 24, 2003 | Michele Kidwell | 35684        | 3761           | 8157             |

Invention:


DISPOSABLE BODY FLUID ABSORBENT PAD

Mail Stop Issue Fee  
COMMISSIONER FOR PATENTS  
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Transmitted herewith are the following for the above-identified application.

- ☒ Issue Fee Transmittal Form PTOL-85  
☒ Utility Fee: \$ 1400.00 ☐ Design Fee: \_\_\_\_\_ ☐ Plant Fee: \_\_\_\_\_  
☒ Publication Fee: \$ 300.00  
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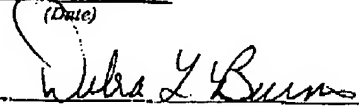
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Signature  
Michael S. Gzybowski

Dated: November 22, 2006

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| Debra L. Burns  |  |
| Typed or Printed Name of Person Signing Certificate   |  |

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